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B1 (Official	Form 1)(1/	08)				oamon		190 ± 0				
United States Bankruptcy C Northern District of Illinois						ourt			Voluntary Petition			
	Pebtor (if ind Richard (		er Last, First	, Middle):				Name of Joint Debtor (Spouse) (Last, First, Middle):  Hatton, Jenny A				
	All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):					
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)					(if mo	four digits of the four than one, s	state all)	r Individual-	Taxpayer l	I.D. (ITIN) No./Complete EIN		
Street Addr	xxx-xx-4774  Street Address of Debtor (No. and Street, City, and State):  130 Thackeray Dr.  Bolingbrook, IL  ZIP Code					Stree 13 B		f Joint Debtor eray Dr.	(No. and St	reet, City,	and State):  ZIP Code	
County of Residence or of the Principal Place of Business:  Will					Cour <b>W</b>	-	ence or of the	Principal Pl	ace of Bus	60440 siness:		
Mailing Address of Debtor (if different from street address):					Mail	ng Address	of Joint Debt	tor (if differe	ent from str	reet address):		
					_	ZIP Code	:					ZIP Code
	Principal A from street		siness Debtorove):	r								I
Type of Debtor (Form of Organization) (Check one box)  Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Tax-Exempt Entity (Check box, if applicab			c one box) siness eal Estate as 101 (51B) oker  mpt Entity t, if applicable exempt org	s defined	define	the later 7 ter 9 ter 11 ter 12 ter 13 are primarily co	Petition is F	hapter 15 f a Foreign hapter 15 f a Foreign e of Debts k one box)	Petition for Recognition Main Proceeding Petition for Recognition Nonmain Proceeding			
		Filing F	ee (Check or	Cod		of the Unite	e Code).		red by an indivi onal, family, or		rpose."	
☐ Filing F attach si is unabl	igned applicate to pay fee Gee waiver re	thed  in installmation for the except in integrated (appendix a property of the except in integrated (appendix appendix	nents (applicate court's constallments. I oplicable to ce court's cons	able to inc sideration Rule 1006 hapter 7 i	certifying t (b). See Offi ndividuals	hat the debt cial Form 3A only). Must	tor Chec	Debtor is Debtor is k if: Debtor's to insider k all applica A plan is Acceptan	a small busin not a small b aggregate nor s or affiliates) able boxes: being filed w ces of the pla	ness debtor as usiness debtor acontingent l o are less that with this petition were solici	s defined i or as defin liquidated n \$2,190,0 ion. ited prepet	n 11 U.S.C. § 101(51D). ed in 11 U.S.C. § 101(51D). debts (excluding debts owed 00. ition from one or more S.C. § 1126(b).
☐ Debtor 6	estimates tha	nt funds will nt, after any	ation  I be available exempt proper for distribut	erty is ex	cluded and	administrat						FOR COURT USE ONLY
Estimated N  1- 49	Number of C 50- 99	reditors  100- 199	200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated A	Assets  \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,00 to \$500 million	1 \$500,000,001 to \$1 billion				
Estimated L  \$0 to \$50,000	Liabilities	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,00 to \$500 million	1 \$500,000,001 to \$1 billion				

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Page 2 Name of Debtor(s): Voluntary Petition Hatton, Richard G Jr. (This page must be completed and filed in every case) Hatton, Jenny A All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Stephen J. West, Atty. August 7, 2009 Signature of Attorney for Debtor(s) (Date) Stephen J. West, Atty. 02989794 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

## B1 (Official Form 1)(1/08) Voluntary Petition

(This page must be completed and filed in every case)

### Name of Debtor(s):

Hatton, Richard G Jr. Hatton, Jenny A

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### (Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition

is true and correct, that I am the foreign representative of a debtor in a foreign

proceeding, and that I am authorized to file this petition.

Signature of Foreign Representative

Printed Name of Foreign Representative

Page 3

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

#### X /s/ Richard G Hatton, Jr.

Signature of Debtor Richard G Hatton, Jr.

#### X

Date

▼ /s/ Jenny A Hatton

Signature of Joint Debtor **Jenny A Hatton** 

Telephone Number (If not represented by attorney)

August 7, 2009

Date

#### Signature of Attorney\*

#### X /s/ Stephen J. West, Atty.

Signature of Attorney for Debtor(s)

#### Stephen J. West, Atty. 02989794

Printed Name of Attorney for Debtor(s)

#### Stephen J. West

Firm Name

628 Columbus Dr.

Rm. 102

Ottawa, IL 61350

Address

## Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address			

#### 815-434-7250 Fax: 815-434-0951

Telephone Number

#### August 7, 2009

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### **V**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D(Official Form 1, Exhibit D) (12/08)

## **United States Bankruptcy Court Northern District of Illinois**

		Northern District of Illinois		
In re	Richard G Hatton, Jr. Jenny A Hatton		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D(Official Form 1, Exhibit D) (12/08) - Cont.
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Richard G Hatton, Jr. Richard G Hatton, Jr.
Date: August 7, 2009

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B 1D(Official Form 1, Exhibit D) (12/08)

## **United States Bankruptcy Court Northern District of Illinois**

		Not then it District of Illinois		
In re	Richard G Hatton, Jr. Jenny A Hatton		Case No.	
	•	Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D(Official Form 1, Exhibit D) (12/08) - Cont.
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
requirement of 11 0.5.C. § 109(ii) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Jenny A Hatton
Jenny A Hatton
Date: August 7, 2009

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B7 (Official Form 7) (12/07)

#### United States Bankruptcy Court Northern District of Illinois

	Richard G Hatton, Jr.			
In re	Jenny A Hatton		Case No.	
		Debtor(s)	Chapter	7
			-	

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$30,000.00	Him 2007
\$36,000.00	2008
\$0.00	Her 2007
\$0.00	2008

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts*. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESSDATES OFAMOUNT STILLOF CREDITORPAYMENTSAMOUNT PAIDOWINGCNACMonthly payment\$400.00\$9,500.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

2

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

AND LOCATION

DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

3

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN

DESCRIPTION AND VALUE OF
PROPERTY

#### 6. Assignments and receiverships

None

e a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND LOCATION

NAME AND ADDRESS OF COURT DATE OF DESCRIPTION AND VALUE OF

OF CUSTODIAN CASE TITLE & NUMBER ORDER PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None List all prop

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

5

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

NATURE OF BUSINESS

**BEGINNING AND** 

6

NAME (ITIN)/ COMPLETE EIN ADDRESS **ENDING DATES** 

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

**ADDRESS** NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME **ADDRESS** 

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was None issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED Case 09-29462 Doc 1 Filed 08/12/09 Entered 08/12/09 08:32:25 Desc Main Document Page 14 of 59

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY RECOR

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** 

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
DATE AND PURPOSE
OF WITHDRAWAL
OF WITHDRAWAL
OF PROPERTY

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated

group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND TAXPAYER IDENTIFICATION NUMBER (EIN)

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	August 7, 2009	Signature	/s/ Richard G Hatton, Jr.
			Richard G Hatton, Jr.
			Debtor
Date	August 7, 2009	Signature	/s/ Jenny A Hatton
			Jenny A Hatton
			Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B6 Summary (Official Form 6 - Summary) (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Richard G Hatton, Jr., Jenny A Hatton		Case No.	
		Debtors	Chapter	7

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	5,960.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		9,500.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	17		104,995.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			3,261.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			3,170.00
Total Number of Sheets of ALL Schedu	iles	28			
	To	otal Assets	5,960.00		
			Total Liabilities	114,495.00	

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Form 6 - Statistical Summary (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Richard G Hatton, Jr.,		Case No.	
	Jenny A Hatton			
		Debtors	Chapter	7

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 16)	3,261.00
Average Expenses (from Schedule J, Line 18)	3,170.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	2,500.00

#### State the following:

State the lone wing.		
Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		4,500.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		104,995.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		109,495.00

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B6A (Official Form 6A) (12/07)

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

Debtors

#### SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property Husband, Wife, Joint, or Community Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

Debtors

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on hand	J	10.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking account - First American	J	100.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Х		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Miscellaneous household goods, furniture & furnishings.	J	800.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Wearing apparel	J	50.00
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic, and other hobby equipment.	х		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	х		
		(	Sub-Tota (Total of this page)	al > <b>960.00</b>

2 continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re	Richard G Hatton, Jr.,
	Jenny A Hatton

Case No.
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#### Debtors

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	x			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tota	al > <b>0.00</b>
			(To	otal of this page)	a1 / <b>U.UU</b>

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re	Richard G Hatton, Jr.,
	Jenny A Hatton

Case No.
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#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	2001 Saturn		J	5,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	Х			
28.	Office equipment, furnishings, and supplies.	x			
29.	Machinery, fixtures, equipment, and supplies used in business.	x			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	x			
33.	Farming equipment and implements.	x			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	x			

Sub-Total > (Total of this page)

5,000.00

Total >

5,960.00

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (12/07)

In re	Richard G Hatton, Jr.,	Case No
	Jenny A Hatton	

Debtors

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$136,875.
☐ 11 U.S.C. §522(b)(2)	
■ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption		
Other Exemptions The necessary wearing apparel, bible, school books and family pictures of the debtors, Richard G & Jenny A Hatton, Jr. and the debtor's dependants;	735 ILCS 5/12-1001(a)	100.00	0.00		
Personal property,household goods,furnishings,funds held by employer,funds on deposit, tax returns, other property listed on Schedule B not otherwise claimed as exempt.	735 ILCS 5/12-1001(b)	8,000.00	0.00		
The debtor's interest not to exceed \$2,400 in value in any one motor vehicle.	735 ILCS 5/12-1001(c)	4,800.00	0.00		

Total: 12,900.00 0.00

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B6D (Official Form 6D) (12/07)

In re	Richard G Hatton, Jr.,
	Jenny A Hatton

Debtors

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	COXT _ ZGEZ	UNLLQULDA	D I SP U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.	-		Security is a 2001 Saturn obtained in 2009 as purchase money security	Т	ATED			
CNAC			interest.					
		١.						
		J			X			
			Value \$ 5,000.00				9,500.00	4,500.00
Account No.								
			Value \$	1				
Account No.								
			Value \$	-				
Account No.	t		value φ	H				
	1							
	上		Value \$	Subt	oto	$\sqcup$		
<b>0</b> continuation sheets attached			(Total of t				9,500.00	4,500.00
							9,500.00	4,500.00
	s)	3,300.00	7,500.00					

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B6E (Official Form 6E) (12/07)

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In re	Richard G Hatton, Jr.,	Case No	
	Jenny A Hatton		
-		, Debtors	

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

also on the Statistical Summary of Certain Liabilities and Related Data.  Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busines whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Richard G Hatton, Jr., Jenny A Hatton		Case No.	
_		Debtors	-7	

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

			<u>r</u>				
CREDITOR'S NAME,	CO	Нι	usband, Wife, Joint, or Community	00	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	DEBTOR	J M H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE	COXHLXGEXH	L Q U -	SPUT	AMOUNT OF CLAIM
Account No.			Claim was incurred for services.	T Y	D A T E D		
Advanced Healthcare PO Box 091700 Milwaukee, WI 53209		J			X		31.00
Account No.	-		Claim was incurred for collection account.	+	┢		0.100
Adventist Hinsdale Hospital % Merchants Credit Guide 223 W. Jackson St. 900 Chicago, IL 60606		J			x		
				L			912.00
Account No.  AFNI, Inc.		J	Claim was incurred for collection account.		x		
							69.00
Account No.			Claim was incurred for collection account.				
AmereniP		J			x		
							70.00
Subtotal							1,082.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case	No
	Jenny A Hatton		

CDEDITOR'S NAME	С	Нι	sband, Wife, Joint, or Community	С	U	Т	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No.	CODEBTOR	C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Claim was incurred for collection account.	CONTINGENT	D A T	2		AMOUNT OF CLAIM
	ł			L	E D	,		
Ameritech % OSI Collect		J			x	(		161.00
	L	L		$\perp$	$\perp$	$\downarrow$	$\dashv$	161.00
Account No.	1		Claim was incurred for collection account.					
Ameritech Illinois % ILL Coll Svc		J			x	(		
								241.00
Account No.	╁	H	Claim was incurred for collection account.	+	+	$\dagger$	$\dashv$	
Amritech Paging % CBA		J			x	<b>,</b>		
								241.00
Account No. 42270972			Claim was incurred for collection account.		T	T		
Applied Card Bank 4700 Exchange Court Boca Raton, FL 33431		J			x	(		
	Ļ			$\downarrow$	퇶	$\downarrow$	4	600.00
Account No.	ł		Claim was incurred for services.					
Associated Radiologist Joliet PO Box 3837 Springfield, IL 62708-3837		J			X	(		
	L	L		$\perp$	$\perp$			56.00
Sheet no. 1 of 16 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Subtotal (Total of this page)								1,299.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

						_		
CREDITOR'S NAME,	Ç	Нι	usband, Wife, Joint, or Community	Ğ	Ü	P	2	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT		DISPUTED	- 1	AMOUNT OF CLAIM
Account No.			Claim was incurred for collection account.		E D			
AT T % Asset Acceptance LLC PO Box 2036 Warren, MI 48090		J			X	t		339.00
Account No. 262 512-1165 900 0			Claim was incurred for services.			Г	Т	
AT&T PO Box 8100 Aurora, IL 60507-8100		J			x			59.00
Account No.			Claim was incurred for services.			T	†	
Barnes-Jewish Hospital PO Box 500071 Saint Louis, MO 63150-0071		J			x			98.00
Account No.			Claim was incurred for services.			Ī	T	
Burr Ridge Family Practice 911 Elm St. Suite 215 Hinsdale, IL 60521-3641		J			x			79.00
Account No. 4862-3626-8343-8629			Claim was incurred for consumer goods &			T	T	
Capital One Bank PO Box 60024 City Of Industry, CA 91716-0024		J	services.		x			32.00
Sheet no. 2 of 16 sheets attached to Schedule of		•		Subt	ota	ıl	T	607.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	ze)	) [	607.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

	I c	Нп	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No.	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Claim was incurred for collection account.	CONTINGENT	NL I QU I DATED		AMOUNT OF CLAIM
CBA Collection Bureau		J			X		
							241.00
Account No.	ł		Claim was incurred for collection account.				
Collectibles Today % Universal Fidelity LP PO Box 941911 Houston, TX 77094-8911		J			x		
							68.00
Account No. 50394148584			Claim was incurred for consumer goods.				
Columbia House Terre Haute, IN 47811		J			x		
							111.00
Account No. 7011588030			Claim was incurred for services.				
ComEd Bill Payment Center Chicago, IL 60668-0001		J			x		
Account No.	╀		Claim was incurred for collection account.				199.00
Commonwealth Edison % Inovision	-	J			x		
							82.00
Sheet no. <u>3</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			[ (Total of t	Sub			701.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

	С	Hu	sband, Wife, Joint, or Community	Тс	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXT_XGEX	SL-QU-DAT	ローのPUTED	AMOUNT OF CLAIM
Account No. 5483-7470-1216-2674			Claim was incurred for collection account.	'	E		
Conseco Fin 345 St. Peter/900 Landmark Saint Paul, MN 55102		J			x		625.00
Account No. 1603381210	+		Claim was incurred for balance owed on	+			020.00
Cricut Customer Service 1545 S. 4800 West Salt Lake City, UT 84104		J	account.		x		200.00
Account No.	+		Claim was incurred for collection account.	+			200.00
Debt Credit Services		J	oranii was incarrea for concention accounts.		x		339.00
Account No.	+		Claim was incurred for collection account.	-			339.00
DuPage Radiologists S.C. % Tri-County Accounts Bureau, Inc. PO Box 515 Wheaton, IL 60189-0515		J			x		14.00
Account No.	}		Claim was incurred for services.			H	14.00
DuPage Radiologists SC PO Box 70 Hinsdale, IL 60522		J			x		
							14.00
Sheet no. <u>4</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	•		(Total of t	Subt his			1,192.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No
	Jenny A Hatton	

	Tc	ш.,	sband, Wife, Joint, or Community	T <sub>C</sub>	lп	Ιn	1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLLQULDAT	D I S P U T E D	AMOUNT OF CLAIM
Account No.			Claim was incurred for collection account.	Т	T E D		
Edward Hospital % Revenue Production Mgmt Dept. 77308; PO Box 77000 Detroit, MI 48277-0308		J			X		60.00
Account No.	1		Claim was incurred for collection account.				
Edward Hospital % Merchants' Credit Guide Co. 223 W. Jackson Blvd. Chicago, IL 60606		J			x		545.00
Account No.			Claim was incurred for collection account.				
Emergency Healthcare Physician % State Collection Service, Inc. PO Box 6250 Madison, WI 53716-0250		J			x		63.00
Account No.			Claim was incurred for services.				33.33
Emergency Healthcare Physicians 649 Executive Dr. Willowbrook, IL 60527-5603		J			x		31.00
Account No.	+		Claim was incurred for services.			_	31.00
Emergency Healthcare Physicians 649 Executive Dr. Willowbrook, IL 60527-5603		J			x		
							60.00
Sheet no. <u>5</u> of <u>16</u> sheets attached to Schedule o Creditors Holding Unsecured Nonpriority Claims	f	•	(Total of	Sub			759.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

	16	100	should Wife laint or Community	1	Ιυ		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. 5421-1600-4102-1454	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Claim was incurred for collection account.	CONTINGENT	O N L L QU L D A T E D	DISPUFED	AMOUNT OF CLAIM
FCNB Master Note Trust % FBCS CS 18025 Hauppauge, NY 11788-8825		J			X		1,109.00
Account No. 1614852			Claim was incurred for collection account.				
First Consumers National Bank % Evergreen Professional Recoveries PO Box 666 Bothell, WA 98041-0666		J			x		831.00
Account No.			Claim was incurred for balance owed for				
First Midwest Bank 300 N Hunt Club Rd Gurnee, IL 60031		J	repossession.		x		24,538.00
Account No. <b>36698716</b>			Claim was incurred for collection account.				,
First Premier 5 Arrow Financial Services 7301 N Lincoln Ave Lincolnwood, IL 60712		J			x		467.00
Account No. 5178-0071-6075-0022	$\vdash$		Claim was incurred for collection account.	+			- 1
First Premier Bank % Encore Receivable Management PO Box 3330 Olathe, KS 66063-3330		J			x		380.00
Sheet no. 6 of 16 sheets attached to Schedule of	_			Sub	tota	1	27,325.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

							_	
CREDITOR'S NAME,	C	Нι	usband, Wife, Joint, or Community	Ğ	Ü	P	)	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODE BTOR	C A M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT		D I S P U T E D	- 1	AMOUNT OF CLAIM
Account No. <b>543362830513</b>			Claim was incurred for collection account.		E D			
First Premier Bank 900 W Delaware St. Sioux Falls, SD 57104		J			X			800.00
Account No. 30758075			Claim was incurred for balance owed for			Γ	T	
Ford Credit PO Box 55000 Dept. 194101 Detroit, MI 48255-1941		J	repossession.		x			2,235.00
Account No.	t	H	Claim was incurred for services.			t	+	
Good Samaritan Hospital PO Box 93548 Chicago, IL 60673		J			x			118.00
Account No.			Claim was incurred for collection account.			T	T	
Gran Cielo LLC % Collection Masters LLC 208 W Randolph 935 Chicago, IL 60606		J			x			107.00
Account No.		T	Claim was incurred for services.			T	†	
Hinsdale Hospital PO Box 9247 Hinsdale, IL 60522		J			x			78.00
Sheet no. 7 of 16 sheets attached to Schedule of		•		Subt	ota	ıl	T	2 220 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ze)	) [	3,338.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

	_		about Wife Islant or Occurrent	1		<u> </u>	1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLLQULDAT	DISPUTED	AMOUNT OF CLAIM
Account No.			Claim was incurred for collection account.	T	E D		
Hinsdale Hospital/Reg. % Tri-County Accounts Bureau, Inc. PO Box 515 Wheaton, IL 60189-0515		J			x		45.00
Account No.			Claim was incurred for collection account.				
IL Power Co		J			x		
							70.00
Account No.			Claim was incurred for medical collecion				
ILL Collection Service		J	account.		х		
							13,500.00
Account No.			Claim was incurred for services.				
Infinity Healthcare Physicians SC PO Box 3261 Milwaukee, WI 53201-3261		J			x		
							424.00
Account No.			Claim was incurred for services.				
Jeng N. Su, M.D., S.C. 701 S. Main St. Lombard, IL 60148		J			х		
							25.00
Sheet no. <b>8</b> of <b>16</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	14,064.00						

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

CDEDITORIC MAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	NL QU L DAT	ローのPUTED	AMOUNT OF CLAIM
Account No.			Claim was incurred for services.	T	E D		
Joliet Smile World Dental Center 315 S. Larkin Ave. Joliet, IL 60436		J			X		42.00
Account No.			Claim was incurred for collection account.	<u> </u>			43.00
Joliet Smile World Inc. % Collection Professionals, Inc. PO Box 841 Joliet, IL 60434-0841		J			x		47.00
Account No.			Claim was incurred for collection account.	+			47.00
LDG Investments, LLC 1429 N. Prospect Ave. Milwaukee, WI 53202		J			x		2,970.00
Account No.			Claim was incurred for collection account.	+			2,970.00
Lenox Collections PO Box 3024 Philadelphia, PA 19093-0001		J			х		22.00
Account No.	-		Claim was incurred for collection account.				32.00
Literary Guild Select Book Club % RJM Acquisitions LLC PO Box 18006 Hauppauge, NY 11788-8806		J			x		
							74.00
Sheet no. <u>9</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			3,166.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

CDEDITORIO NA ME	С	Hu	sband, Wife, Joint, or Community	C	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No.	C O D E B T O R	C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Claim was incurred for collection account.	ONTINGENT	NL - QU - DATED	I S P	AMOUNT OF CLAIM
Loyola Univ. Phyn's Foundation % ICS PO Box 646 Oak Lawn, IL 60454-0646		J			X		52.00
Account No.	T		Claim was incurred for collection account.				
MEDCLR Inc. % Assetcare Inc. PO Box 15379; Dept. 17 Wilmington, DE 19850		J			x		458.00
Account No.	╁		Claim was incurred for collection account.				
Meijer Inc. % Reli Adj Bureau		J			x		1,128.00
Account No. <b>412060200156</b>	-		Claim was incurred for collection account.				1,120.00
Merrick Bank 10705 S Jordan GA 200 South Jordan, UT 84095		J			x		644.00
Account No.	$\vdash$		Claim was incurred for collection account.	+			
NCO-MedcIr		J			х		
							90.00
Sheet no. <b>10</b> of <b>16</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			2,372.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

	С	Ни	sband, Wife, Joint, or Community	С	U	р	
(See instructions above.)	CODEBTOR	C H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	NL QU L DAT	ローのPUTED	AMOUNT OF CLAIM
Account No.			Claim was incurred for services.		E		
Neurological Care Specialists 333 Chestnut St Suite 102 Hinsdale, IL 60521		J			x		25.00
Account No. <b>3-07-19-3483 4</b>			Claim was incurred for services.	T			
Nicor Gas PO Box 310 Aurora, IL 60507-0310		J			x		375.00
Account No. <b>2289668676</b>			Claim was incurred for collection account.	L			
Nicor Gas % Asset Acceptance LLC PO Box 2036 Warren, MI 48090		J			x		936.00
Account No.			Claim was incurred for collection account.				
Northwest Collectors		J			x		407.00
Account No. <b>5433-6283-0513-7261</b>			Claim was incurred for collection account.	-		Н	187.00
Premier Bankcard Inc. % Arrow Financial Services 21031 Network Place Chicago, IL 60678-1031		J			x		467.00
Sheet no. 11 of 16 sheets attached to Schedule of				Subt	tota		
Creditors Holding Unsecured Nonpriority Claims			(Total of t				1,990.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	OD E B T O R	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Claim was incurred for collection account.	CONTINGENT	D A T	D I S P U T E D	
Account No.	1		Claim was incurred for collection account.	Ι΄	Ė		
Provena St. Mary		J			x		268.00
Account No.			Claim was incurred for collection account.				
Provo Craft % National Asset Management LLC PO Box 840 Moon Twp., PA 15108		J			x		200.00
Account No.	t	t	Claim was incurred for collection account.			H	
Risk Management Alt		J			x		161.00
Account No.			Claim was incurred for collection account.			Г	
SBC Illinois % GC Services 6330 Gulfton Houston, TX 77081		J			x		340.00
Account No. 03 SC 1565	T	T	Claim was incurred for civil judgment.			Г	
Silver Cross Hospital % Steven Plato Troy, Atty. 5 E. Van Buren St.; Suite 306 Joliet, IL 60432-4225		J			x		1,630.00
Sheet no. 12 of 16 sheets attached to Schedule of		_		Subt	ota	1	0.500.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	2,599.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

CREDITOR'S NAME,	C	Ηι	usband, Wife, Joint, or Community	CO	U	Ţ	)	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	QU	S F U	- 1	AMOUNT OF CLAIM
Account No.	1		Claim was incurred for services.	'	Ė			
SMO Physicians		J			x	T		340.00
Account No.			Claim was incurred for services.		$\vdash$	t	+	<u> </u>
St. Mary's Hospital Ozaukee Payment Processing Center PO Box 2960 Milwaukee, WI 53201-2960		J			x			58.00
Account No.			Claim was incurred for services.		T	T	1	
St. Mary's Hospital Ozaukee Payment Processing Center PO Box 2960 Milwaukee, WI 53201-2960		J			x			700.00
Account No.			Claim was incurred for services.		T	T	1	
Superior Air Ground Ambulance PO Box 1407 Elmhurst, IL 60126		J			x			86.00
Account No. 09 SC 1730		T	Claim was incurred for civil judgment.	T	T	T	1	
Superior Car Credit, Inc. % Jonathan L. Carbary 1814 Grandstand Place Elgin, IL 60123		J			x	,		5,633.00
Sheet no. 13 of 16 sheets attached to Schedule of				Subt	tota	al	7	0.047.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	ge`	١	6,817.00

Case 09-29462 Doc 1 Filed 08/12/09 Entered 08/12/09 08:32:25 Desc Main Document Page 39 of 59

B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case N	0
	Jenny A Hatton		

Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Claim was incurred for services.  X  Claim was incurred for services.  Claim was incurred for services.  Claim was incurred for services.  X  Claim was incurred for services.  X  Claim was incurred for services.		٦			1 -		-	
MALING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No.  Tehming Liang MD 454 W. Boughton Rd. Bolingbrook, IL 60440  Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Sultie B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Sulte 1385 Chicago, IL 60673-0565  Chicago, IL 60673-0565  Claim was incurred for services.  Account No. The University of Chicago Hospitals PO Box 668  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668	CREDITOR'S NAME,	CO	Hus	sband, Wife, Joint, or Community	16	U N	D I	
(See instructions above.)  Account No.  Tehming Liang MD 454 W. Boughton Rd. Bolingbrook, IL 60440  Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Claim was incurred for services.  Claim was incurred for services.  Claim was incurred for services.  Account No.  Claim was incurred for services.  Claim was incurred for services.  Account No.  Claim was incurred for services.  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions  Do Box 668		D		DATE CLAIM WAS INCURRED AND	N	Ļ	S	
(See instructions above.)  Account No.  Tehming Liang MD 454 W. Boughton Rd. Bolingbrook, IL 60440  Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Claim was incurred for services.  Claim was incurred for services.  Claim was incurred for services.  X X  Account No.  Claim was incurred for services.		B			1	Q	υ	
Tehming Liang MD 454 W. Boughton Rd. Bolingbrook, IL 60440  Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr., Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668		T O			I N	ľ	ΙT	AMOUNT OF CLAIM
Tehming Liang MD 454 W. Boughton Rd. Bolingbrook, IL 60440  Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Claim was incurred for services.  X  Account No.  The University of Chicago Physicians Group 75 Remittance Dr., Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668	(See instructions above.)	Ř		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ē	D	D	
Tehming Liang MD 454 W. Boughton Rd. Bollingbrook, IL 60440  Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bollingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668	Account No.			Claim was incurred for services.	Ť	Ť		
454 W. Boughton Rd. Bolingbrook, IL 60440  Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565					-	D	H	4
Bolingbrook, IL 60440  Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Account No.  Claim was incurred for services.  J Claim was incurred for services.  X  X  Account No.  Claim was incurred for services.  X  Claim was incurred for services.  X  Account No.  Claim was incurred for services.  Claim was incurred for services.  X  Claim was incurred for services.  X  Claim was incurred for services.  X  Claim was incurred for services.			١.			١.,		
Account No.  Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Claim was incurred for services.  Claim was incurred for services.  X  Claim was incurred for services.			J			X		
Account No.  The Mining Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Claim was incurred for services.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Claim was incurred for services.  X  Claim was incurred for services.	Bolingbrook, IL 60440							
Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668								34.00
454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668	Account No.	<u> </u>		Claim was incurred for services.				
454 W. Boughton Rd. Suite B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668								
Suite B Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Claim was incurred for services.  X  Claim was incurred for services.  X  X  Account No.  Claim was incurred for services.  X  X  Account No. 109029904A  Claim was incurred for collection account.  X  X  X  X  X  X  X  X  X  X  X  X  X			١.			١.,		
Bolingbrook, IL 60440  Account No.  The University of Chicago Physicians Group Physicians Incurred for services.  Account No.  Claim was incurred for services.  X  X  Account No. 109029904A  Claim was incurred for collection account.  Time Warner Cable - 1 % Financial Control Solutions PO Box 668			J			X		
Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  J Claim was incurred for collection account.  X X X X X X X X X X X X X X X X X X X	Suite B							
Account No.  The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668	Bolingbrook, IL 60440							
The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668								34.00
Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Chicago, IL 60673-0565  Chicago, IL 60673-0565  Claim was incurred for services.  X  Account No. 109029904A  Claim was incurred for collection account.  Time Warner Cable - 1 % Financial Control Solutions PO Box 668	Account No.			Claim was incurred for services.				
Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Chicago, IL 60673-0565  Chicago, IL 60673-0565  Claim was incurred for services.  X  Account No. 109029904A  Claim was incurred for collection account.  Time Warner Cable - 1 % Financial Control Solutions PO Box 668		1						
75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668	The University of Chicago							
Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  Claim was incurred for services.  Z  Claim was incurred for collection account.  X  X  X  X  X  X  X  X  X  X  X  X  X	Physicians Group		J			X		
Chicago, IL 60675-1385  Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  Claim was incurred for services.  Z  Claim was incurred for collection account.  X  X  X  X  X  X  X  X  X  X  X  X  X	75 Remittance Dr.; Suite 1385							
Account No.  The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  Claim was incurred for services.  X  X  35,420								
The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  J  Claim was incurred for collection account.  X  X  35,420								69.00
PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  J Claim was incurred for collection account.  X X 35,420	Account No.			Claim was incurred for services.				
PO Box 70565 Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  J Claim was incurred for collection account.  X X 35,420		1						
Chicago, IL 60673-0565  Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  Claim was incurred for collection account.  X								
Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  Claim was incurred for collection account.  X	PO Box 70565		J			X		
Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  Claim was incurred for collection account.	Chicago, IL 60673-0565							
Account No. 109029904A  Time Warner Cable - 1 % Financial Control Solutions PO Box 668  Claim was incurred for collection account.								
Time Warner Cable - 1 % Financial Control Solutions PO Box 668  J X								35,420.00
% Financial Control Solutions PO Box 668	Account No. 109029904A			Claim was incurred for collection account.				
% Financial Control Solutions PO Box 668  J X	 							
PO Box 668		1	$  \cdot  $			ļ		
		1	J			۸	l	
		1					l	
Germantown, WI 53022-0668	Germantown, WI 53022-0668	1						
								483.00
Sheet no. 14 of 16 sheets attached to Schedule of Subtotal	Sheet no. <b>14</b> of <b>16</b> sheets attached to Schedule of				Subt	ota	1	22.242.22
Creditors Holding Unsecured Nonpriority Claims (Total of this page)				(Total of	his	pag	e)	36,040.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

CDEDITORIO NA ME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLLQULDAT	DISPUTED	AMOUNT OF CLAIM
Account No.			Claim was incurred for collection account.	Т	E D		
University of Chicago Hospitals % Trustmark Recovery Services 541 Otis Bowen Dr. Munster, IN 46321		J			X		42.00
Account No.			Claim was incurred for collection account				
US Bank c/o Collection Master LLC 166 W. Washington St. Chicago, IL 60602		J			x		1,071.00
Account No. 1204882			Claim was incurred for services.		_		1,071.00
Village of Hinsdale 19 E. Chicago Ave. Hinsdale, IL 60521		J			x		114.00
Account No.			Claim was incurred for consumer goods				114.00
Walgreens 101 Lily Cache Lane Bolingbrook, IL 60440		J			x		50.00
Account No.			Claim was incurred for balance owed on	_			30.00
Walgreens Co. PO Box 90482 Chicago, IL 60696-0482		J	account.		x		
							49.00
Sheet no. <u>15</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt his			1,326.00

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 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

In re	Richard G Hatton, Jr.,	Case No
	Jenny A Hatton	

		_			_		
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	LLQUL	DISPUTE	AMOUNT OF CLAIM
	R	Ľ		E N	IDATED	D	
Account No. <b>5246-210-494</b>			Claim was incurred for services.	'	E		
WE Energies PO Box 2089 Milwaukee, WI 53201-2089		J			x		
							256.00
Account No.			Claim was incurred for services.	T			
Wisconsin Radiology Spec. S.C. PO Box 2350 Brookfield, WI 53008-2350		J			x		
							62.00
Account No.				T			
Account No.				$\vdash$			
Account No.				$\vdash$			
				$\perp$		<u>L</u>	
Sheet no. <u>16</u> of <u>16</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt his 1			318.00
			(23.11.32.3		ota		
			(Report on Summary of So				104,995.00

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B6G (Official Form 6G) (12/07)

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

Debtors

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 09-29462 Doc 1 Filed 08/12/09 Entered 08/12/09 08:32:25 Desc Main Document Page 43 of 59

B6H (Official Form 6H) (12/07)

In re	Richard G Hatton, Jr.,	Case No.
	Jenny A Hatton	

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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**B6I (Official Form 6I) (12/07)** 

	Richard G Hatton, Jr.			
In re	Jenny A Hatton		Case No.	
		Debtor(s)		

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Daharda Madiaal Castron	DEPENDENTS	S OF DEBTOR AND S	POLISE		
Debtor's Marital Status:		AGE(S):			
Married	RELATIONSHIP(S): Nephew		Years		
Walled	Nephew		Years		
Employment:	DEBTOR		SPOUSE		
	lanager				
	Blue Gold Hospitality/Holiday Inn	Disabled			
	Years				
Address of Employer					
* *	oliet, IL				
INCOME: (Estimate of average or pr	rojected monthly income at time case filed)		DEBTOR		SPOUSE
	ommissions (Prorate if not paid monthly)	\$	2,500.00	\$	0.00
2. Estimate monthly overtime	•	\$	0.00	\$	0.00
			_		
3. SUBTOTAL		\$_	2,500.00	\$	0.00
4. LESS PAYROLL DEDUCTIONS					
a. Payroll taxes and social secur	ity	\$_	408.00	\$	0.00
b. Insurance		\$ _	0.00	\$	0.00
c. Union dues		\$_	0.00	\$	0.00
d. Other (Specify):			0.00	\$	0.00
			0.00	\$	0.00
5. SUBTOTAL OF PAYROLL DED	UCTIONS	\$_	408.00	\$	0.00
6. TOTAL NET MONTHLY TAKE I	HOME PAY	\$_	2,092.00	\$	0.00
7 Pagular income from anarotion of	hysiness on mustossion on form (Attach detailed sta	atement) \$	0.00	\$	0.00
8. Income from real property	business or profession or farm (Attach detailed sta	\$ _ \$	0.00	\$ <u></u>	0.00
9. Interest and dividends		Ψ <u>-</u> \$	0.00	\$ <u> </u>	0.00
	payments payable to the debtor for the debtor's us	se or that of	0.00	Ψ	0.00
dependents listed above	payments payment to use access for use access as	\$	0.00	\$	0.00
11. Social security or government ass	istance			-	
(Specify):		\$	0.00	\$	1,169.00
		\$_	0.00	\$	0.00
12. Pension or retirement income		\$ _	0.00	\$	0.00
13. Other monthly income					
(Specify):		\$_	0.00	\$	0.00
		\$_	0.00	\$	0.00
			0.00	<i></i>	1 160 00
14. SUBTOTAL OF LINES 7 THRO	UGH 13	\$_	0.00		1,169.00
15. AVERAGE MONTHLY INCOM	E (Add amounts shown on lines 6 and 14)	\$_	2,092.00	\$	1,169.00
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)			\$	3,261.	00

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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B6J (Official Form 6J) (12/07)

	Richard G Hatton, Jr.			
In re	Jenny A Hatton		Case No.	
		Debtor(s)	·	

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22 and 22 and 23 are calculated.	The averag	
$\square$ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,000.00
a. Are real estate taxes included? Yes No _X_	'	
b. Is property insurance included? Yes NoX		
2. Utilities: a. Electricity and heating fuel	\$	0.00
b. Water and sewer	\$	0.00
c. Telephone	\$	160.00
d. Other	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	540.00
5. Clothing	\$	80.00
6. Laundry and dry cleaning	\$	0.00
7. Medical and dental expenses	\$	300.00
8. Transportation (not including car payments)	\$	300.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	80.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	150.00
e. Other  12. Taxes (not deducted from wages or included in home mortgage payments)	\$	0.00
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	400.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other Cleaning supplies & paper products	\$	80.00
Other School lunches	\$	80.00
10. AVERA CE MONTHU V EVENENGES (F 11). 1.15. P 1		0.470.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,	\$	3,170.00
if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
AO CITA TENTE OF MONITH WINET INCOME	_	
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	3,261.00
b. Average monthly expenses from Line 18 above	\$	3,170.00
c. Monthly net income (a. minus b.)	\$	91.00

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B6 Declaration (Official Form 6 - Declaration). (12/07)

## **United States Bankruptcy Court Northern District of Illinois**

In re	Richard G Hatton, Jr. Jenny A Hatton	Case No.			
	•	Debtor(s)	Chapter	7	
	DECLARATIO	ON CONCERNING DEBTOR'S	S SCHEDULI	ES	

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date	August 7, 2009	Signature	/s/ Richard G Hatton, Jr.
			Richard G Hatton, Jr.
			Debtor
Date	August 7, 2009	Signature	/s/ Jenny A Hatton
			Jenny A Hatton
			Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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# Document Page 47 of 59 United States Bankruptcy Court Northern District of Illinois

In re	Richard G Hatton, Jr. Jenny A Hatton		Case No.			
*** * *	onlya.e	Debtor(s)	Chapter	7		
	DISCLOSURE OF COMP	PENSATION OF ATTO	RNEY FOR DI	CBTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplati	Rule 2016(b), I certify that I a filing of the petition in bankrupto	am the attorney for cy, or agreed to be pai	the above-named debtor d to me, for services rend	and that ered or to	
	For legal services, I have agreed to accept		\$	400.00		
	Prior to the filing of this statement I have receive	red	\$	400.00		
	Balance Due		\$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed co	ompensation with any other persor	n unless they are mem	pers and associates of my	law firm.	
	☐ I have agreed to share the above-disclosed composition of the agreement, together with a list of the				rm. A	
5.	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
į	<ul> <li>a. Analysis of the debtor's financial situation, and reb. Preparation and filing of any petition, schedules,</li> <li>c. Representation of the debtor at the meeting of cred. [Other provisions as needed]</li> <li>Negotiations with secured creditors reaffirmation agreements and applications of the secured creditors of the secured credits of the secured creditors of the secured creditors of the secur</li></ul>	statement of affairs and plan whice ditors and confirmation hearing, a to reduce to market value; ex ations as needed; preparation	h may be required; and any adjourned hea emption planning	rings thereof;	g of	
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			es, relief from stay ac	tions or	
		CERTIFICATION				
	I certify that the foregoing is a complete statement of pankruptcy proceeding.	any agreement or arrangement for	r payment to me for re	presentation of the debtor	r(s) in	
Dated	d: August 7, 2009	/s/ Stephen J. W	est, Atty.			
		Stephen J. West Stephen J. West 628 Columbus D Rm. 102	, Atty. 02989794 Dr.			
		Ottawa, IL 61350 815-434-7250 Fa				

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## **United States Bankruptcy Court Northern District of Illinois**

		Not that if D	istrict or minions		
	Richard G Hatton, Jr.				
In re	Jenny A Hatton		D-ht(-)	Case No.	7
			Debtor(s)	Chapter	
	CHAPTER 7 IN	IDIVIDIJAI DERT	OR'S STATEMENT	OF INTEN	JTION
	CHAITER / II	DIVIDUAL DEBI	OKBBIATEMENT	OF INTE	VIION
PART	<b>A</b> - Debts secured by property of property of the estate. Attach			ted for <b>EAC</b>	H debt which is secured by
Proper	rty No. 1				
Credi CNAC	tor's Name:		Describe Property S Security is a 2001 S money security inte	aturn obtaine	t: ed in 2009 as purchase
Proper	rty will be (check one):				
_	Surrendered	■ Retained			
	ining the property, I intend to (check	at least one):			
	Reaffirm the debt				
	Other. Explain	(for example, av	void lien using 11 U.S.C	2. § 522(f)).	
Proper	rty is (check one):				
	Claimed as Exempt		☐ Not claimed as exc	empt	
	<b>B</b> - Personal property subject to une additional pages if necessary.)	expired leases. (All three	ee columns of Part B mu	st be complet	ed for each unexpired lease.
Proper	rty No. 1				
Lesson	r's Name: E-	Describe Leased Pa	roperty:	Lease will b U.S.C. § 365	e Assumed pursuant to 11 5(p)(2):
person	re under penalty of perjury that t al property subject to an unexpire August 7, 2009		/ intention as to any pro- /s/ Richard G Hatton, Richard G Hatton, Jr. Debtor	Jr.	estate securing a debt and/or
Date _	August 7, 2009	Signature	/s/ Jenny A Hatton Jenny A Hatton		

Joint Debtor

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### **United States Bankruptcy Court** Northern District of Illinois

In re	Richard G Hatton, Jr. Jenny A Hatton		Case No.		
mie	Jenny A Hatton	Debtor(s)	Chapter 7		
	VE	RIFICATION OF CREDITOR N	<b>IATRIX</b>		
		Number of	f Creditors:	82	
	(our) knowledge.	hereby verifies that the list of credi	tors is true and correct to the	e best of my	
Date:	August 7, 2009	/s/ Richard G Hatton, Jr.			
		Richard G Hatton, Jr. Signature of Debtor			
Date:	August 7, 2009	/s/ Jenny A Hatton			
		Jenny A Hatton Signature of Debtor			

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

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over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

X /s/ Stephen J. West, Atty.

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name of Attorney	Signature of Attorney	Date
Address:		
628 Columbus Dr.		
Rm. 102		
Ottawa, IL 61350		
815-434-7250		
I (We), the debtor(s), affirm that I (we)	Certificate of Debtor have received and read this notice.	
Richard G Hatton, Jr.		
Jenny A Hatton	X /s/ Richard G Hatton, Jr.	August 7, 2009
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X /s/ Jenny A Hatton	August 7, 2009
·	Signature of Joint Debtor (if any)	Date

Stephen J. West, Atty. 02989794

August 7, 2009

Advanced Healthcare PO Box 091700 Milwaukee, WI 53209

Adventist Hinsdale Hospital % Merchants Credit Guide 223 W. Jackson St. 900 Chicago, IL 60606

AFNI, Inc.

AmerenIP

Ameritech % OSI Collect

Ameritech Illinois % ILL Coll Svc

Amritech Paging % CBA

Applied Card Bank 4700 Exchange Court Boca Raton, FL 33431

Associated Radiologist Joliet PO Box 3837 Springfield, IL 62708-3837

AT T % Asset Acceptance LLC PO Box 2036 Warren, MI 48090

AT&T PO Box 8100 Aurora, IL 60507-8100

Barnes-Jewish Hospital PO Box 500071 Saint Louis, MO 63150-0071 Burr Ridge Family Practice 911 Elm St. Suite 215 Hinsdale, IL 60521-3641

Capital One Bank PO Box 60024 City Of Industry, CA 91716-0024

CBA Collection Bureau

CNAC

Collectibles Today % Universal Fidelity LP PO Box 941911 Houston, TX 77094-8911

Columbia House Terre Haute, IN 47811

ComEd Bill Payment Center Chicago, IL 60668-0001

Commonwealth Edison % Inovision

Conseco Fin 345 St. Peter/900 Landmark Saint Paul, MN 55102

Cricut Customer Service 1545 S. 4800 West Salt Lake City, UT 84104

Debt Credit Services

DuPage Radiologists S.C. % Tri-County Accounts Bureau, Inc. PO Box 515 Wheaton, IL 60189-0515

DuPage Radiologists SC PO Box 70 Hinsdale, IL 60522

Edward Hospital % Revenue Production Mgmt Dept. 77308; PO Box 77000 Detroit, MI 48277-0308

Edward Hospital % Merchants' Credit Guide Co. 223 W. Jackson Blvd. Chicago, IL 60606

Emergency Healthcare Physician % State Collection Service, Inc. PO Box 6250 Madison, WI 53716-0250

Emergency Healthcare Physicians 649 Executive Dr. Willowbrook, IL 60527-5603

Emergency Healthcare Physicians 649 Executive Dr. Willowbrook, IL 60527-5603

FCNB Master Note Trust % FBCS CS 18025 Hauppauge, NY 11788-8825

First Consumers National Bank % Evergreen Professional Recoveries PO Box 666 Bothell, WA 98041-0666

First Midwest Bank 300 N Hunt Club Rd Gurnee, IL 60031

First Premier 5 Arrow Financial Services 7301 N Lincoln Ave Lincolnwood, IL 60712

First Premier Bank % Encore Receivable Management PO Box 3330 Olathe, KS 66063-3330

First Premier Bank 900 W Delaware St. Sioux Falls, SD 57104

Ford Credit PO Box 55000 Dept. 194101 Detroit, MI 48255-1941

Good Samaritan Hospital PO Box 93548 Chicago, IL 60673

Gran Cielo LLC % Collection Masters LLC 208 W Randolph 935 Chicago, IL 60606

Hinsdale Hospital PO Box 9247 Hinsdale, IL 60522

Hinsdale Hospital/Reg.
% Tri-County Accounts Bureau, Inc.
PO Box 515
Wheaton, IL 60189-0515

IL Power Co

ILL Collection Service

Infinity Healthcare Physicians SC PO Box 3261 Milwaukee, WI 53201-3261

Jeng N. Su, M.D., S.C. 701 S. Main St. Lombard, IL 60148

Joliet Smile World Dental Center 315 S. Larkin Ave. Joliet, IL 60436

Joliet Smile World Inc. % Collection Professionals, Inc. PO Box 841
Joliet, IL 60434-0841

LDG Investments, LLC 1429 N. Prospect Ave. Milwaukee, WI 53202

Lenox Collections PO Box 3024 Philadelphia, PA 19093-0001

Literary Guild Select Book Club % RJM Acquisitions LLC PO Box 18006 Hauppauge, NY 11788-8806

Loyola Univ. Phyn's Foundation % ICS PO Box 646 Oak Lawn, IL 60454-0646

MEDCLR Inc. % Assetcare Inc. PO Box 15379; Dept. 17 Wilmington, DE 19850

Meijer Inc. % Reli Adj Bureau Merrick Bank 10705 S Jordan GA 200 South Jordan, UT 84095

NCO-Medclr

Neurological Care Specialists 333 Chestnut St Suite 102 Hinsdale, IL 60521

Nicor Gas PO Box 310 Aurora, IL 60507-0310

Nicor Gas % Asset Acceptance LLC PO Box 2036 Warren, MI 48090

Northwest Collectors

Premier Bankcard Inc. % Arrow Financial Services 21031 Network Place Chicago, IL 60678-1031

Provena St. Mary

Provo Craft % National Asset Management LLC PO Box 840 Moon Twp., PA 15108

Risk Management Alt

SBC Illinois % GC Services 6330 Gulfton Houston, TX 77081 Silver Cross Hospital % Steven Plato Troy, Atty. 5 E. Van Buren St.; Suite 306 Joliet, IL 60432-4225

SMO Physicians

St. Mary's Hospital Ozaukee Payment Processing Center PO Box 2960 Milwaukee, WI 53201-2960

St. Mary's Hospital Ozaukee Payment Processing Center PO Box 2960 Milwaukee, WI 53201-2960

Superior Air Ground Ambulance PO Box 1407 Elmhurst, IL 60126

Superior Car Credit, Inc. % Jonathan L. Carbary 1814 Grandstand Place Elgin, IL 60123

Tehming Liang MD 454 W. Boughton Rd. Bolingbrook, IL 60440

Tehming Liang, M.D., Ph.D. 454 W. Boughton Rd. Suite B
Bolingbrook, IL 60440

The University of Chicago Physicians Group 75 Remittance Dr.; Suite 1385 Chicago, IL 60675-1385

The University of Chicago Hospitals PO Box 70565 Chicago, IL 60673-0565 Time Warner Cable - 1 % Financial Control Solutions PO Box 668 Germantown, WI 53022-0668

University of Chicago Hospitals % Trustmark Recovery Services 541 Otis Bowen Dr.
Munster, IN 46321

US Bank c/o Collection Master LLC 166 W. Washington St. Chicago, IL 60602

Village of Hinsdale 19 E. Chicago Ave. Hinsdale, IL 60521

Walgreens 101 Lily Cache Lane Bolingbrook, IL 60440

Walgreens Co. PO Box 90482 Chicago, IL 60696-0482

WE Energies PO Box 2089 Milwaukee, WI 53201-2089

Wisconsin Radiology Spec. S.C. PO Box 2350 Brookfield, WI 53008-2350